



VERIFICATION OF ENROLLMENT REQUEST

(please print)

Name

HSU-ID

Street Address

HSU Email Address @humboldt.edu

City State Zip

Local Telephone Number

Letter of Verification: *(All verification letters, with the exception of degree verifications, include units enrolled, class level, and student status, unless otherwise indicated.)*

Term(s) verifying (i.e. Fall '10): _____

Please list any additional information to be verified: _____

Mail to: _____

Fax to: _____

This form cannot be processed without the student's signature:

Student's Signature Date

FOR OFFICE USE ONLY

Student pick-up date: _____

Comments: _____
